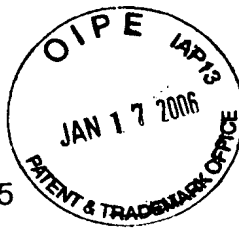


Appl. No. 10/821,882
Amendment dated
Reply to OA of October 19, 2005



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/821,882
Applicant : Moo Hwan Kim et al.
Filed : April 12, 2004
Title : APPARATUS AND METHOD FOR MEASURING HEAT
DISSIPATION
TC/A.U. : 2859
Examiner : VERBITSKY, GAIL KAPLAN
Docket No. : KIMM3007/EM

RESPONSE UNDER 37 CFR 1.116, AFTER FINAL

(Cancelling Rejected Claims)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action of October 19, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.

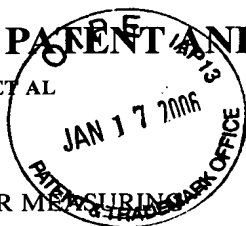
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: MOO HWAN KIM ET AL

SERIAL-NO.: 10/821,882

FILED: April 12, 2004

FOR: APPARATUS AND METHOD FOR MEASURING
HEAT DISSIPATION



GROUP ART UNIT: 2859

EXAMINER: Gail Kaplan VERBITSKY

ATTY. REFERENCE: KIMM3007/BEU

AF
(if)

COMMISSIONER OF PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a communication/amendment in the above-identified application.

☐ Small entity status under 37 CFR 1.9 and 1.27 is claimed.

☒ No additional fee is required.

The fee, if any, has been calculated as shown below:

Fee Basis	Number of Claims After Amendment	Highest Number Previously Paid For	Extra Claims	Small Entity	Full Fee
Total Claims		- ¹	= ³	× \$ 25 =	× \$ 50 =
Independent Claims		- ²	= ³	× \$100 =	× \$ 200 =
<input type="checkbox"/> First Presentation of Proper Multiple Dependent Claim				+ \$180 =	+ \$360 =
TOTAL					

¹ If less than 20 enter 20.

² If less than 3 enter 3.

³ If less than 0 enter 0.

☐ Please charge my **Deposit Account Number 02-0200** in the amount of \$ _____. A duplicate copy of this sheet is attached.

☐ A check in the amount of \$ _____ is attached.

☐ The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees due under 37 CFR 1.16 and 37 CFR 1.17 or credit any overpayment to **Deposit Account Number 02-0200**. A duplicate copy of this sheet is attached.

☐ Also enclosed is/are:

23364

Customer Number
Phone: (703) 683-0500

DATE: January 17, 2006

Respectfully submitted,

Benjamin E. Urcia
Attorney for Applicant
Registration Number: 33,805